CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

REGISTRY OF ELECTION FINANCE 404 JAMES ROBERTSON PARKWAY, SUITE 1614 NASHVILLE, TN 37243-1360 (615) 74-7959

For State and Local Candidates For Single-Candidate Committees

(615) 741-7959				
1. DATE OF REPORT 4-23-94	2.A NAME OF CANDID	DATE OR COMMITTEE	WEN TIDWO	E//
2.B. IF COMMITTEE, NAME OF CAND	DIDATE	100	3. ELECTION DATE	
GWEN TIDE	/ /		MA439	4
4.A. CAMPAIGN ADDRESS	-00	01-1-	71-0-4	24
Street or Rural Route BOX 160	37 ChAY	LANOOSA TN	374160	267-4213
4.B. CANDIDATE'S HOME ADDRESS	(if different than 4.A.)	0 /		
Street or Rural Route	PLACE ChA	HANOOGA, TN	37415 2	67-4213
5. OFFICE SOUGHT include district n		6. NAME OF POLITICAL TR		idate)
CrimiNAL Court ClER	K	CAROL UND	ERWOOD	
7. CATEGORY OF REPORT				
PRE-PRIMARY POST-PRIMA			SUPPLEMENTAL	AMENDED
8.A. BEGINNING DATE OF REPORTING	IG PERIOD	8.B. ENDING DATE OF REP		
9. (Check one)				
A. This campaign is excless AND expenditur B. This campaign is req	es total \$1,000 or less foured to file a detailed final	osure because contributions (in or this reporting period. (Comp ancial disclosure because contr nore than \$1,000 for this repor	lete items 12d., 12e., and ributions (including in-kind	d 12f.)
10. I/we do solemnly swear or affirm that is an accurate accounting of campa the Campaign Financial Disclosure the personal financial benefit of the signature of candidate	aign contributions and ex Act. Additionally, I/we so	penditures required to be repo wear or affirm that no campaig	orted by political candidate in contributions have been ned by the federal internal	es/campaign by n expended for
11. SWORN TO AND SUBSCRIBED	BEFORE ME IN THE	- /	UBSCRIBED BEFORE MI	E IN THE
COUNTY OF	lon	COUNTY OF	enulton	
AND THE STATE OF /EN	VESSEE	_ AND THE STATE OF	ZENNESSE	3
THIS 23 DAY OF April	19,94	THIS 23 DAY OF	April	19 94
SWOON TY S	Keith	_ Suvan	notary public	
My Commission Expires 5	(ulu 26 100 s	My Commission Expire	- fut. 00 can.	
date commission e.		date	commission expires	
and a second				
Notary Seal			Notary Seal	~~~
Notary Sear			Notary Sear	
12. SUMMARY				
	BT	\$	-0-	1 /
b. TOTAL RECEIPTS THIS PERIOD. c. TOTAL DISBURSEMENTS THIS P d. BALANCE ON HAND (12a, plus 12			1470,00	
a TOTAL DISPUSSEMENTS THE	EDIOD	····· \$ 4	0.345.04	
C. TOTAL DISBURSEMENTS THIS P	EHIOD	\$∠	0)3130-11	24 96
d. BALANCE ON HAND (12a. plus 12	b. minus 12c.)		\$1,1	24.96
e. TOTAL LOANS OUTSTANDING			\$	-0-
f. TOTAL OBLIGATIONS OUTSTANI	DING		s_/2	529.90



SUMMARY PAGE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) COMMITTEE TO ELECA 14. REPORT COVERING THE PERIOD
(+WEN TiDUST/ FROM: 2/15/94 TO: 4/23/94
RECEIPTS
15. CONTRIBUTIONS (other than loans and interest) a. Unitemized Contributions (\$100 or less from each source this period) \$ 4,220.00
a. Unitemized Contributions (\$100 or less from each source this period)
b. Itemized Contributions (over \$100 from each source this period) \$ 7,250.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15a. and 15b.)
16. LOANS RECEIVED THIS REPORTING PERIOD
17. INTEREST RECEIVED THIS REPORTING PERIOD.
18. TOTAL RECEIPTS (add 15c., 16., and 17.) (must be shown in item 12b.)
DISBURSEMENTS
 EXPENDITURES (other than loan payments) a. Expenditures (\$100 or less each payee this period)(must be listed by category - e.g. printing, postage, gasoline)
Post Office Box \$ 26.50
HARDWARE MATERIALS \$ 91.50
BANK Checks \$ 10.73
CAMPAISA CONTributions, 50.00
Computer Disk \$ 71.00
RubbER Stamps & 11.20
\$
\$
*
Total of Expenditures (\$100 or less each payee)
b. Itemized Campaign Expenditures (Over \$100 each payee this period)
c. Itemized Other Expenditures (Over \$100 each payee this period) \$
d. TOTAL EXPENDITURES (other than loan repayments)(add 19a., 19b., and 19c.)
d. TOTAL EXPENDITURES (other than loan repayments)(add 19a., 19b., and 19c.)
21. TOTAL DISBURSEMENTS (add 19d.and 20.) (must be shown in item 12c.)
22. IN-KIND CONTRIBUTIONS a. Unitemized in-kind contributions (\$100 or less from each source this period)\$ 5000
b. Itemized in-kind contributions (over \$100 from each source this period)\$
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22a. and 22b.)
23. LOANS LOANS OUTSTANDING (must be shown in item 12e.)
24. OBLIGATIONS a. Unitemized Obligations Outstanding (\$100 or less each)\$
b. Itemized Obligations Outstanding (Over \$100 each)\$ 1529.90
c. TOTAL OBLIGATIONS OUTSTANDING (add 24a. and 24b.) (must be shown in item 12f.)

SS-1133 RDA 1159 Page 2 of 10



ITEMIZED STATEMENT OF CONTRIBUTIONS—CANDIDATE

TOTAL ITEMIZED CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if lirst itemized page) COMPLETE THE FOLLOWING FOR EACH ITEMIZED CONTRIBUTION If Name, Address, City, State and Zip Code of Payee JACK RANDIES 313 MASTER RAL W STANDAM M. RAMER & JERRY STOAN 313 MASTER RAL W STANDAM M. RAMER & JERRY STOAN 330 CLOUER DATE DY 200 CO CHATHAN OOGA TN 3743 II Name, Address, City, State and Zip Code of Payee JACKING STOAN 330 CLOUER DATE DY 200 CO CHATHAN OOGA TN 3745 II Name, Address, City, State and Zip Code of Payee JACKINE & SAWIFEN 340 CA HE STANDAM 350 CA HE STANDAM 360 CA HE STANDAM 3740 CA Amount JACKINE & JACKING STANDAM AMOUNT JACKING STANDAM AMOU	. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO E/ECT		VERING THE PERIOD
TOTAL ITEMIZED CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) COMPLETE THE FOLLOWING FOR EACH ITEMIZED CONTRIBUTION III Name, Address, City, State and Zip Code of Payee JRCK RAND IES 313 MASTER Rd. W JRAMPA M. RAMER & TERRY S/OAN 3330 Clo UER DAIE DY ChATHAN OOGA TO 304/5 III Name, Address, City, State and Zip Code of Payee JRAMPA M. RAMER & TERRY S/OAN Amount Amo	GWEN TIOWELL	FROM: 2/15/94	TO: 4/23/9
COMPLETE THE FOLLOWING FOR EACH TEMIZED CONTRIBUTION I Manne, Address, City, State and 2D Code of Payee 313 MASTER Rd. W 21 ANTHAN SOSA, TN 37343 II Name, Address, City, State and 2D Code of Payee 31 AMOUNT 32 AMOUNT 33 CLO UER DATE DT 200 CO Chathan Ooga, TN 37415 II Name, Address, City, State and 2D Code of Payee 31 AMOUNT 32 CLO UER DATE DT 200 CO Chathan Ooga, TN 37402 Amount 34 CACCOLOR OF THE WITHOUT OF THE TOTAL OF THE T	TOTAL ITEMIZED CONTRIBUTIONS FROM SPECIFING PAGE (Annual St. Service)	nagal	Amount
Amount		page)	
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313 MASTER Rd. W Chattandroga, TN 37343 Amount All Name, Address, City, State and Zip Code of Payee Amount			
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INAPPA AND SAY IN STATE	313 MASTER Rd. W		500000
Amount	ChA++ANDDOA, TN 37343		9,000 -
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III Name, Address, City, State and Zip Code of Payee JEAN AND STATE AND	GIENNA M. RAMER & JERRY SIDAN		
III Name, Address, City, State and Zip Code of Payee JEAN AND STATE AND	1330 ClOUERDAIE Dr		200 00
Amount Amount Acqueline E. Shulten Blog- Amount Acqueline E. Shulten Amount Acqueline E. Shulten Amount Amoun	ChA++ANOOGA TN 37415		200
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Amount	TARRUPLINE E. ShultEN		
III Name, Address, City, State and Zip Code of Payee THE ANDOGA TO 37402 Amount THE KIE E DAVIDSON PO BOX 126 LIXSON, TN 37343 III Name, Address, City, State and Zip Code of Payee JENNIE R. BAKER 3 105 EASTON AUE Chathan Doga, TN 37415 III Name, Address, City, State and Zip Code of Payee JAM Coui IIARC 9413 Woody Hollow Drive Chathan Nooga, TN 3743 III Name, Address, City, State and Zip Code of Payee TIM Address, City, State and Zip Code of Payee TIM Address, City, State and Zip Code of Payee Chathan Ooga, TN 3742 II Name, Address, City, State and Zip Code of Payee Chathan Ooga, TN 37402 III Name, Address, City, State and Zip Code of Payee Chathan Ooga, TN 37416 II Name, Address, City, State and Zip Code of Payee Chathan Ooga, TN 37416 II Name, Address, City, State and Zip Code of Payee Chathan Ooga, TN 37416 II Name, Address, City, State and Zip Code of Payee Chathan Ooga, TN 37416 TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to Item 3. of next page if additional pages of this form are used. If this is the last page TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to Item 3. of next page if additional pages of this form are used. If this is the last page TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to Item 3. of next page if additional pages of this form are used. If this is the last page TOTAL ITEMIZED CONTRIBUTIONS, (Total of items 3. and 4.) TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.)	136 GA. AVE Str 600 DOME Bldg-		7. 00
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HINAME, Address, City, State and Zip Code of Payee JENN'E R. BAKER 3105 EASTON AUE Chathan Doga, TN 37415 III Name, Address, City, State and Zip Code of Payee SAM Co Willard G413 Woody Hollow Drive Chathan Moga, TN 3742 III Name, Address, City, State and Zip Code of Payee Tim Adkins 31 PATTON PARKWAY Chathan Oga, TN 37402 III Name, Address, City, State and Zip Code of Payee Okeryl & Martin Mc Nabb 5010 Hwy 58 Chathan Oga, TN 374/6 III Name, Address, City, State and Zip Code of Payee Wm. R. Heck 204 Janes Bldg Chathan Oga, TN 3740 z TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.)			
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Il Name, Address, City, State and Zip Code of Payee SAM CO KI' I/A RC' 94/3 WOOGY HO I/OW Drive Charla Mooga, TN 37421 Il Name, Address, City, State and Zip Code of Payee Tim Adkins 31 Parton Parkway Charla Nooga, TN 37402 Il Name, Address, City, State and Zip Code of Payee Ohery & Martin Mc Wabb 50/0 HAY S8 Charla Mooga, TN 374/6 Il Name, Address, City, State and Zip Code of Payee Wm. R. Heck 204 James Bldg Charla Nooga, TN 37402 TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.)			
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Il Name, Address, City, State and Zip Code of Payee Chary & Martin Mc Nabb Solo Hwy 58 Chartanoga, TN 304/6 Il Name, Address, City, State and Zip Code of Payee Wm. R. Heck 204 Janes Bldg Chartanoga, TN 3040 z TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.)	ChattanoogA, IN 37402		
SOID HWY 58 Chattanoga, TN 304/6 Il Name, Address, City, State and Zip Code of Payee Wm. R. Heck 204 James Bldg Chattanoga, TN 3040 z TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.) 72 50, 00	ull Name, Address, City, State and Zip Code of Payee		Amount
SOID HWY 58 Chattanoga, TN 304/6 Il Name, Address, City, State and Zip Code of Payee Wm. R. Heck 204 James Bldg Chattanoga, TN 3040 z TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.) 72 50, 00	Cheryl & MARTIN MCNABB		
Chattanoga, TN 304/6 Il Name, Address, City, State and Zip Code of Payee Wm. R. Heck 204 James Bldg Chattanoga, TN 3040 z TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.) Amount 250.00			
Chattanoga, TN 3140 z TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.) 7250.00	Chatterna TN ZALL		20009
Chattanoga, TN 3140 z TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.) 7250.00	Ill Name Address City State and tin Code of Payer		Amount
250 00 Chattanoga, TN 3740 z TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.) 72 50, 0 6			Amount
TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.) 72 50, 0 6	WM. K. Meck		
TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.) 72 50, 0 6	204 JAMES Bldg		2000
TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.) 72 50, 0 6			030-
arry forward to item 3. of next page if additional pages of this form are used. If this is the last page in-kind contributions, this amount must be shown in item 15b. of summary page.)	TOTAL ITEMIZED CONTRIBITIONS (Total of items 2 and 4)		
in-kind contributions, this amount must be shown in item 15b. of summary page.)		is is the last page	70.7
4404 (D4104)	f in-kind contributions, this amount must be shown in item 15b. of summary page.)		1250,00
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ITEMIZED STATEMENT OF CONTRIBUTIONS—CANDIDATE

. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PE	RIO
	FROM: TO:	
	Amount	
TOTAL ITEMIZED CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first item COMPLETE THE FOLLOWING FOR EACH ITEMIZED CONTRIBUTION	nized page)	
Ill Name, Address, City, State and Zip Code of Payee	Amount	
	20000000	
ull Name, Address, City, State and Zip Code of Payee	Amount	
	20	
ull Name, Address, City, State and Zip Code of Payee	Amount	
ull Name, Address, City, State and Zip Code of Payee	Amount	
White Address City Code and The Code of Passes		
ull Name, Address, City, State and Zip Code of Payee	Amount	
ull Name, Address, City, State and Zip Code of Payee	Amount	
Il Name, Address, City, State and Zip Code of Payee	Amount	
ull Name, Address, City, State and Zip Code of Payee	Amount	
in Name, Address, Oity, State and Zip Code of Payee	Amount	
III Name, Address, City, State and Zip Code of Payee	Amount	
nest comment registror encladad ten 🗖 dept. April 1900 en esta será 🍮 octobros de laborado e 🕶 entra		
TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.)	100 M 100 M 100 M	
Carry forward to item 3. of next page if additional pages of this form are used in-kind contributions, this amount must be shown in item 15b. of summary p	. If this is the last page	
in-kind contributions, this amount must be snown in item 15b. of summary p	age.)	

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ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS—CANDIDATE

// //	/== /> =/ =/	
1. NAME OF CANDIDATE OR COMMITTEE COMMIT		COVERING THE PERIOD
GWEN LIDWELL	FROM: 2/15/9	94 TO: 4/23/94
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEI	DING PAGE (enter \$0 if first itemized page)	Amount
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED IN-KIN	1	1
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount
A.D. CURREY	wood	15000
2108 S. WATKINS		100-
ChAHANOOGA, TN 37406		
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount
FLANK KINSER		- 46
6001 REE HWY	Wood	25000
	WARREST TO MANAGEMENT	1
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	A
	Description of III-Kind Contribution	Amount
Gerry BASSett	CUPS & Drink Mix	- ~ m
1818 ROCK Bluff Rd	-0.0,	-305
HIX50N, TN 373+3		
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount
Fran Doit		
FRAN DZIK 2216 JENKINS Rd	SigN5	35600
		236 =
ChATTANDOGA, TN 37421		
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount
Tall Halles, Halless, Olly, Glate and Elp Code of Fayor	Description of Inventor Contribution	Amount
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount
20 20 20 20 20 20 20 20 20 20 20 20 20 2		300000000000000000000000000000000000000
Full Name Address Observation of the Control of the		
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount
*		
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount
TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Total of (Carry forward to item 3. of next page if additional pages of	items 3. and 4.)	
of in-kind contributions, this amount must be shown in item	n calls form are used. If this is the last pag- n 22.b. of summary page.)	156.00
		1

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ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES—CANDIDATE

THE MILE OF A TENTE OF	1 = 1 = 1	
	/ / /	OVERING THE PERIOD
GWEN TIDWELL	FROM: 415/9	4 TO: 4/23/94
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PREC	CEDING PAGE (enter \$0 if first page)	Amount 0 -
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CAMP		
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
US POST OFFICE	POSTAGE	925.66
ChATTANOOSA, TN 37416		123.20
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
MACKE & STREET	PoliticaL Reception	85000
ChA+HANDOGA, TN 37402	Reception	000 _
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
ThE TNK Spot POBOX 23682	Printing	1006.03
Chattaneoga, Tw 31422 Full Name, Address, City, State and Zip Code of Payee	11/10/	, 000, 0
	Purpose of Expenditure	Amount
Chattanoogn Area Transportat. 1617 Wilcox B/Vd.	M Advertisins	49000
ChA++ANOO9A TN 37404 Full Name, Address, City, State and Zip Code of Payee		170 -
	Purpose of Expenditure	Amount
CRIBrainerd Rd	Advertising	4992,00
Chatta Nooga, TN 30411 Full Name, Address, City, State and Zip Code of Payee	Durage of Evpanditure	Amount
	Purpose of Expenditure	Amount
Spectra NATIONAL 1001 DOUSON ALLE	Advertising	514.42
ChA++ANOOSA, TN 37404		
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
THE TNK Spot POBOX 23682	Printing	1,00000
Chattanooga, TN 31422		'
Full Name, Address, City, State and Zfp Code of Payee	Purpose of Expenditure	Amount
821 Pinewood RO.	advectising	30600
Olust TN 37405		300
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
5. TOTAL ITEMIZED CAMPAIGN EXPENDITURES (Total	of items 3. and 4.)	
(Carry forward to item 3. of next page if additional pages of campaign expenditures, this amount must be shown in	of this form are used. If this is the last page	10,084.11
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ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES—CANDIDATE

NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING THE PERIOD	
		FROM:	TO:
	ECEDING BAGE (anter \$0.14 for	t page)	Amount
 TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRI 4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CAM 	PAIGN EXPENDITURE	st page)	
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure		Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure		Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure		Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure		Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure		Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure		Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure		Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure		Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure		Amount
5. TOTAL ITEMIZED CAMPAIGN EXPENDITURES (Tot (Carry forward to item 3. of next page if additional page of campaign expenditures,this amount must be shown in	s of this form are used. If the	nis is the last page	

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Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
5. TOTAL ITEMIZED OTHER EXPENDITURES (Total of (Carry forward to item 3. of next page if additional page of other expenditures, this amount must be shown in it	es of this form are used. If this is the	last page
SS-1130 (Rev. 1/94) RDA 1159		Page 8 of 10



ITEMIZED STATEMENT OF OBLIGATIONS—CANDIDATE

WANTE OF CANDIDATE OF COMMITTEE POMM, HEELT		2. REPORT COVERING PERIOD					
1. NAME OF CANDIDATE OR COMMITTEE CO	0 , 0	FROM: 2/15/9	FROM: 2/15/94 TO: 4/23/94				
COMPLETE ITEMS 3—7 FOR EACH ITEMIZED OBLIGATION							
Full Name, Address, City, State and Zip Code of Creditor	4. Outstanding Balance at Be- ginning of Period	5. Amount of Debt Incurred This Period	6. Payment This Period	7. Outstanding Balance at End Of Period			
The INK Spot Po Box 23682 Chattanoosa, TN 37422	-0-	1986.40	1000.00	986.40			
		1000.00	1000,00	100110			
Description of Obligation							
Chatt-Poblishing Co. 400 E. 11th St. 37401	-0-	543.50	-0-	543.50			
Description of Obligation							
Description of Obligation							
Description of Obligation							
Description of Obligation							
Description of Obligation							
Description of Obligation							
TOTALS (Items 4—7) (Total of item 7 must be shown in item 24b. of summary page.)	-6-	2,529.90	1000.00	1529,90			

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ITEMIZED STATEMENT OF LOANS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING PERIOD			
		FROM:	то:		
COMPLETE ITEMS 3—7 FOR EACH ITEMIZED LOAN					
Full Name, Address, City, State and Zip Code of Creditor	4. Outstanding Balance at Be- ginning of Period	5. Amount of Debt Incurred This Period	6. Payment This Period	7. Outstanding Balance at End Of Period	
20					
		-			
TOTAL 0 (I)					
TOTALS (Items 4—7) (Total of Item 7 must be shown in Item					
23. of summary page.)					
			3		

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